II. TECHNICAL DESCRIPTION OF DATA FILE

Data Set Name NHDS02.PU.TXT

Record Length 88

Number of Records 327,254

III. RECORD LAYOUT: Location and Coding of Data Elements

This section provides detailed information for each sampled record on the file, with a description of each item included on the record. Data elements are arranged sequentially according to their physical location on the file. Unless otherwise stated in the Item Description, the data are derived from the abstract form or from automated sources. The SMG Hospital Market Data File and the hospital interview are alternate sources of data; some other items are computer generated.

| Item Number | Location | Number of Positions | Item description | Code description |
|----------------|----------|------------------------|----------------------------------|---|
| 1 | 1-2 | 2 | Survey Year | 02 |
| 2 | 3 | 1 | Newborn status | 1=Newborn 2=Not newborn |
| 3 | 4 | 1 | Units for age | 1=Years 2=Months 3=Days |
| 4 | 5-6 | 2 | Age in years, months, or days | If units=years: 00-99* If units=months: 01-11 If units=days: 00-28 *Ages 100 and over were recoded to 99 |
| 5 | 7 | 1 | Sex | 1=Male 2=Female |
| 6 | 8 | 1 | Race | 1=White 2=Black/African American 3=American Indian/Alaskan Native 4=Asian 5=Native Hawaiian or other Pacific Isldr 6=Other 8=Multiple race indicated 9=Not stated |
| 7 | 9 | 1 | Marital status | 1=Married 2=Single 3=Widowed 4=Divorced 5=Separated 9=Not stated |
| 8 | 10-11 | 2 | Discharge month | 01-12=January to December |
| 9 | 12 | 1 | Discharge Status | 1=Routine/discharged home 2=Left against medical advice 3=Discharged/transferred to short-term facility 4=Discharged/transferred to long-term care institution 5=Alive, disposition not stated 6=Dead 9=Not stated or not reported |
| 10 | 13-16 | 4 | Days of care | Use to calculate number of days of care. Values of zero generated by the computer from admission and discharge dates were changed to one. (Discharges for which dates of admission and discharge are the same are identified in Item Number 11) |

| Item Number | Location | Number of Positions | Item description | Code description |
|----------------|----------|------------------------|---------------------------------|---|
| 11 | 17 | 1 | Length of stay flag | 0=Less than 1 day 1=One day or more |
| 12 | 18 | 1 | Geographic region | 1=Northeast 2=Midwest 3=South 4=West |
| 13 | 19 | 1 | Number of beds, recode | 1=6-99 2=100-199 3=200-299 4=300-499 5=500 and over |
| 14 | 20 | 1 | Hospital ownership | 1=Proprietary 2=Government 3=Nonprofit, including church |
| 15 | 21-25 | 5 | Analysis weight | Use to obtain weighted estimates |
| 16 | 26-27 | 2 | First two digits of survey year | 20 |
| 17 | 28-32 | 5 | Diagnosis code #1 | * |
| 18 | 33-37 | 5 | Diagnosis code #2 | * |
| 19 | 38-42 | 5 | Diagnosis code #3 | * |
| 20 | 43-47 | 5 | Diagnosis code #4 | * |
| 21 | 48-52 | 5 | Diagnosis code #5 | * |
| 22 | 53-57 | 5 | Diagnosis code #6 | * |
| 23 | 58-62 | 5 | Diagnosis code #7 | * |
| 24 | 63-66 | 4 | Procedure code#1 | * |
| 25 | 67-70 | 4 | Procedure code#2 | * |
| 26 | 71-74 | 4 | Procedure code#3 | * |
| 27 | 75-78 | 4 | Procedure code#4 | * |

| Item Number | Location | Number of Positions | Item description | Code description |
|----------------|----------|---------------------|---|--|
| 28 | 79-80 | 2 | Principal expected source of payment | 01=Worker's compensation 02=Medicare 03=Medicaid 04=Other government 05=Blue Cross/Blue Shield 06=HMO/PPO 07=Other private insurance 08=Self-pay 09=No charge 10=Other 99=Not stated |
| 29 | 81-82 | 2 | Secondary expected source of payment | Same coding as item 28 above, except Not Stated left blank (not coded to 99) |
| 30 | 83-85 | 3 | Diagnosis-Related Groups (DRG) | Grouper version 18.0 |
| 31 | 86 | 1 | Type of Admission | 1 = Emergency 2 = Urgent 3 = Elective 4 = Newborn 9 = Not available |
| 32 | 87-88 | 2 | Source of Admission | 01 = Physician referral 02 = Clinical referral 03 = HMO referral 04 = Transfer from a hospital 05 = Transfer from skilled nursing facility 06 = Transfer from other health facility 07 = Emergency room 08 = Court/law enforcement 09 = Other 99 = Not available |

^{*}Diagnosis and procedure codes are in compliance with the *International Classification of Diseases, 9th Revision, Clinical Modification, (ICD-9-CM)*. For **diagnosis** codes, there is an implied decimal between positions 3 and 4. For E-codes, the implied decimal is between the 4th and 5th position. For inapplicable 4th or 5th digits, a dash is inserted. For **procedure** codes, there is an implied decimal between positions 2 and 3. For inapplicable 3rd or 4th digits, a dash is inserted.